APPLICATION FOR REGISTRATION OF FICTITIOUS NAME

REGISTRATION# G18000051035

Fictitious Name to be Registered: RINACK HANDYMAN SERVICES

Mailing Address of Business: 6460 COLLEGE PARK CIR

NAPLES, FL 34113

Florida County of Principal Place of Business: COLLIER

FILED Apr 23, 2018 **FEI Number:** Secretary of State

Owner(s) of Fictitious Name:

CHAVEZ RINACK, RICARDO 6460 COLLEGE PARK CIR 201 NAPLES, FL 34113

I the undersigned, being an owner in the above fictitious name, certify that the information indicated on this form is true and accurate. I further certify that the fictitious name to be registered has been advertised at least once in a newspaper as defined in Chapter 50, Florida Statutes, in the county where the principal place of business is located. I understand that the electronic signature below shall have the same legal effect as if made under oath and I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, Florida Statutes.

RICARDO CHAVEZ RINACK	04/23/2018
Electronic Signature(s)	Date

Certificate of Status Requested (X) Certified Copy Requested ()